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PATENT NUMBER

U.S. UTILITY Patent Application

O.I.P.E. KW SS Q.A. DMW	PATENT DATE
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CLASS	S'	ART UNIT	EXAMINER
455	516	5681	Smith, K.

TITLE OF INVENTION:

APPLICANT(S):

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ORIGINAL				CROSS REFERENCE(S)								
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	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
	_____ (Assistant Examiner)			NOTICE OF ALLOWANCE MAILED	
				ISSUE FEE	
	_____ (Primary Examiner)			Amount Due	Date Paid
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